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June 26, 2023

**VIA email**

Honorable Rachel P. Kovner  
United States District Judge  
Eastern District of New York  
225 Cadman Plaza East  
Brooklyn, New York 11201

**Re: *United States v. Keith Levy 20-CR-00087 (RPK)***

Dear Judge Kovner:

I represented Keith Levy as CJA-appointed counsel in the above indictment. I write the Court this morning to respectfully request that the Court issue a CJA 20 so that I can submit my CJA voucher for this case. I was appointed to represent Mr. Levy on September 21, 2020, and request that the Court run the date of appointment on the CJA 20 nunc pro tunc to September 21, 2020.

I represented Mr. Levy along with co-counsel Gordon Mehler who stopped billing CJA upon my September 21, 2020 date of appointment. The above case was concluded after trial on April 15, 2021, and I am currently attending to older CJA bills.

Thank you so much.

Sincerely,  
/s/  
Christopher Wright

## CJA 20 APPOINTMENT OF AND AUTHORITY TO PAY COURT-APPOINTED COUNSEL (Rev. 07/17)

1. CIR./DIST./ DIV. CODE		2. PERSON REPRESENTED <b>Keith Levy</b>		VOUCHER NUMBER	
3. MAG. DKT./DEF. NUMBER		4. DIST. DKT./DEF. NUMBER <b>20-CR-87 (RPK)</b>		5. APPEALS DKT./DEF. NUMBER	
6. OTHER DKT. NUMBER					
7. IN CASE/MATTER OF (Case Name) <b>US v. Keith Levy</b>		8. PAYMENT CATEGORY <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Petty Offense <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Other <input type="checkbox"/> Appeal		9. TYPE PERSON REPRESENTED <input checked="" type="checkbox"/> Adult Defendant <input type="checkbox"/> Appellant <input type="checkbox"/> Juvenile Defendant <input type="checkbox"/> Appellee <input type="checkbox"/> Other	
				10. REPRESENTATION TYPE (See Instructions) <b>Criminal Case</b>	
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) <i>If more than one offense, list (up to five) major offenses charged, according to severity of offense.</i> <b>18 USC 875(c) TRANSMISSION OF THREAT TO INJURE</b>					
12. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix), AND MAILING ADDRESS <b>Christopher Wright*</b> <b>299 Broadway</b> <b>Suite 708</b> <b>New York NY 10007</b> Telephone Number : <b>(917) 992-8701</b>			13. COURT ORDER <input checked="" type="checkbox"/> O Appointing Counsel <input type="checkbox"/> C Co-Counsel <input type="checkbox"/> F Subs For Federal Defender <input type="checkbox"/> R Subs For Retained Attorney <input type="checkbox"/> P Subs For Panel Attorney <input type="checkbox"/> Y Standby Counsel  Prior Attorney's Appointment Dates: _____ <input type="checkbox"/> Because the above-named person represented has testified under oath or has otherwise satisfied this Court that he or she (1) is financially unable to employ counsel and (2) does not wish to waive counsel, and because the interests of justice so require, the attorney whose name appears in Item 12 is appointed to represent this person in this case, OR <input type="checkbox"/> Other (See Instructions) _____ <div style="text-align: right;"><b>s/ Rachel P. Kovner</b></div> <div style="text-align: center;">Signature of Presiding Judge or By Order of the Court</div> <div style="display: flex; justify-content: space-between;"> <div><b>7/20/23</b></div> <div><b>9/21/2020</b></div> </div> <div style="display: flex; justify-content: space-between;"> <div>Date of Order</div> <div>Nunc Pro Tunc Date</div> </div> Repayment or partial repayment ordered from the person represented for this service at time appointment. <input type="checkbox"/> YES <input type="checkbox"/> NO		
14. NAME AND MAILING ADDRESS OF LAW FIRM (Only provide per instructions)					

CLAIM FOR SERVICES AND EXPENSES				FOR COURT USE ONLY	
CATEGORIES (Attach itemization of services with dates)		HOURS CLAIMED	TOTAL AMOUNT CLAIMED	MATH/TECH. ADJUSTED HOURS	MATH/TECH. ADJUSTED AMOUNT
In Court	15. a. Arraignment and/or Plea		0.00		0.00
	b. Bail and Detention Hearings		0.00		0.00
	c. Motion Hearings		0.00		0.00
	d. Trial		0.00		0.00
	e. Sentencing Hearings		0.00		0.00
	f. Revocation Hearings		0.00		0.00
	g. Appeals Court		0.00		0.00
	h. Other (Specify on additional sheets)		0.00		0.00
(RATE PER HOUR = \$ ) TOTALS:		0.00	0.00	0.00	0.00
Out of Court	16. a. Interviews and Conferences		0.00		0.00
	b. Obtaining and reviewing records		0.00		0.00
	c. Legal research and brief writing		0.00		0.00
	d. Travel time		0.00		0.00
	e. Investigative and other work (Specify on additional sheets)		0.00		0.00
(RATE PER HOUR = \$ ) TOTALS:		0.00	0.00	0.00	0.00
17. Travel Expenses (lodging, parking, meals, mileage, etc.)					
18. Other Expenses (other than expert, transcripts, etc.)					
<b>GRAND TOTALS (CLAIMED AND ADJUSTED):</b>			0.00		0.00
19. CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD OF SERVICE FROM: _____ TO: _____			20. APPOINTMENT TERMINATION DATE IF OTHER THAN CASE COMPLETION		21. CASE DISPOSITION
22. CLAIM STATUS <input type="checkbox"/> Final Payment <input type="checkbox"/> Interim Payment Number _____ <input type="checkbox"/> Supplemental Payment Have you previously applied to the court for compensation and/or reimbursement for this case? <input type="checkbox"/> YES <input type="checkbox"/> NO      If yes, were you paid? <input type="checkbox"/> YES <input type="checkbox"/> NO Other than from the Court, have you, or to your knowledge has anyone else, received payment (compensation or anything of value) from any other source in connection with this representation? <input type="checkbox"/> YES <input type="checkbox"/> NO      If yes, give details on additional sheets. I swear or affirm the truth or correctness of the above statements. Signature of Attorney _____ Date _____					
APPROVED FOR PAYMENT — COURT USE ONLY					
23. IN COURT COMP.	24. OUT OF COURT COMP.	25. TRAVEL EXPENSES	26. OTHER EXPENSES	27. TOTAL AMT. APPR./CERT. <b>\$0.00</b>	
28. SIGNATURE OF THE PRESIDING JUDGE			DATE	28a. JUDGE CODE	
29. IN COURT COMP.	30. OUT OF COURT COMP.	31. TRAVEL EXPENSES	32. OTHER EXPENSES	33. TOTAL AMT. APPROVED <b>\$0.00</b>	
34. SIGNATURE OF CHIEF JUDGE, COURT OF APPEALS (OR DELEGATE) <i>Payment approved in excess of the statutory threshold amount.</i>			DATE	34a. JUDGE CODE	